



PTO/SB/30 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U. S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

SUBSTITUTE for PTO/SB/30 (09-04), REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

**REQUEST  
FOR  
CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**Address to:  
Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Application Number	09/835,699
Filing Date	April 16, 2001
First Named Inventor	Marcy E. Armstrong
Group Art Unit	1631
Examiner Name	James Martinell
Attorney Docket Number	19258CC

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 C.F.R. § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. **Submission required under 37 C.F.R. § 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
- a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- ii. ☐ Other \_\_\_\_\_
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☒ Return Receipt Postcard (itemized)
- v. ☐ Other \_\_\_\_\_
2. **Miscellaneous**
- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)
- b. ☒ Other Claims as Amended (20 claims, \$200.00 fee)
3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
- ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 13-2755
- i. ☒ RCE fee required under 37 C.F.R. § 1.17(e)
- ii. ☐ Extension of time fee (37 C.F.R. § 1.136 and 1.17)
- iii. ☐ Other \_\_\_\_\_

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Name (Print/Type)	Laura M. Ginkel	Registration No.	51,737
Signature	<i>Laura M. Ginkel</i>	Date	3/9/2005

**NOTE: SEND TO MAIL STOP RCE****CERTIFICATE OF MAILING OR FACSIMILE TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on:

Name (Print/Type)	Danielle L. Murante		
Signature	<i>Danielle L. Murante</i>	Date	March 9, 2005



PATENT  
CASE NO. 19258CC

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In re application of: MARCY E. ARMSTRONG, ETAL.

Serial No. 09/835,699

Filed April 16, 2001

Group Art Unit 1631

Examiner James Martinell

For: POLYNUCLEOTIDE HERPES VIRUS VACCINE

Transmitted herewith is an amendment in the above-identified application.

☐ No additional fee is required.

☒ The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2) Claims remaining after amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	* <u>20</u>	-	** <u>30</u> =	<u>0</u> X	\$50	= <u>0.00</u>
Independent Claims	* <u>5</u>	-	*** <u>4</u> =	<u>1</u> X	\$200	= <u>200.00</u>
Multiple Dependent Claims					\$360 ****	= <u>        </u>
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						200.00

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

\*\*\*\* Add this fee only if application is amended to include multiple dependent claims (regardless of number) and no multiple dependent claims were originally filed.

Charge \$ 200.00 to Deposit Account No. 13-2755. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2755. A duplicate copy of this sheet is enclosed.

**I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date appearing below.**

**MERCK & CO., INC.**

By Daniel J. Murante Date March 9, 2005

Respectfully,

Laura M. Ginkel

By: Laura M. Ginkel

Attorney          for Applicant(s)

Reg. No. 51,737

MERCK & CO., INC.  
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Date: March 9, 2005

IN DUPLICATE